Only

# STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Cindy Axne for Congress PO Box 65551 ADDRESS (number and street) (Check if address is changed) West Des Moines 50265 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS Info@cindyaxneforcongress.com (Check if address is changed) Optional Second E-Mail Address Jennifer@cindyaxneforcongress.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.Cindyaxneforcongress.com (Check if address is changed) DATE 2022 C00646844 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Fiihr, Jennifer, , , Type or Print Name of Treasurer Fiihr, Jennifer, , , [Electronically Filed] Date 05 2022 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

E	C Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the can information below.)	ndidate
	Name of Candidate Axne, Cindy, , ,	
	Party Affiliation DEM Sought: * House Senate President	State IA istrict 03
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican, etc.)	Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	anization is a:
	Corporation Corporation w/o Capital Stock Labor Organization	zation
	Membership Organization Trade Association Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated function committee. (i.e., nonconnected committee)	d or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mor committees/organizations, at least one of which is an authorized committee of a federal candidate.	re political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	re political
	Committees Participating in Joint Fundraiser	
	1	

	FEC Form 1 (Revised 0	2/2009)		Page <b>3</b>
٧	Vrite or Type Committee Name  Cindy Axne for	Congress		
6.	<b>-</b>	ganization, Affiliated Committee, Joint Fundraising	Representative, or Lead	dership PAC Sponsor
	Mailing Address	5825 Waterbury Circle		
		Des Moines	IA503	12
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Funds	raising Representative	Leadership PAC Sponso
7.	Custodian of Records: Idention books and records.	fy by name, address (phone number optional) and pos	ition of the person in poss	ession of committee
	Fiihr, Jennif	er, , ,		
	Full Name			
	Mailing Address	5825 Waterbury Circle		
		Des Moines	IA     503	12
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephone	e number	
8.	Treasurer: List the name and any designated agent (e.g., a	l address (phone number optional) of the treasurer ossistant treasurer).	of the committee; and the	e name and address of
	Full Name Fiihr, Jennif	er, , ,		
	of Treasurer	FORE Westerhum Circle		
	Mailing Address	5825 Waterbury Circle		
		Des Moines	IA503	12
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephone	e number	·

	FEC Form 1	(Revised 02/2009)	Page <b>4</b>
	Full Name of Designated Agent		
	Mailing Address		
	Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
•	Banks or Other safety deposit box	Depositories: List all banks or other depositories in which the committee deposits funds, hold ses or maintains funds.	ds accounts, rents
	Name of Bank, D	epository, etc.	
		lowa State Bank	
	Mailing Address	3601 EP True Parkway	
		West Des Moines IA 50265	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Name of Bank, D	epository, etc.	
		Eagle Bank	
	Mailing Address	7815 Woodmont Avenue	
		Bethesda MD 20814	
		CITY ▲ STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
•	d Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
TWELFTH AME	NDMENT DEFENDERS FUND		
Mailing Address	PO BOX 5418		
	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	TAKOMA PARK	MD	20913
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Spi
Connecto	ed Organization Affiliated Committee X Joffy by name, address (phone number – optional)		ative Leadership PAC Spo
Connecto			ative Leadership PAC Spo
Connecte  Connecte  Connecte  Connecte  Connecte  Connecte			ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name			ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name			ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	fy by name, address (phone number – optional)		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)		
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY	STATE A Telephone Number	ZIP CODE A
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposition afety deposit boxes or mailing and mailin	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Connected Agent: Identify the Position of Banks, Amales Agent: Identify the Position of Bank, Amales Agent: Identify the Identify th	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in white naintains funds.	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Deposition and deposit boxes or make the property of the pro	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in white naintains funds.  gamated Bank	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Deposition and deposit boxes or make the property of the pro	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in white naintains funds.  gamated Bank	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
MAJORITY KEEF	7ERS 		
AA-Traa Aalaa	600 PENNSYLVANIA AVE SE		
Mailing Address	UNIT 15180		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee  Joint  y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional)	t Fundraising Representation	
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name   _   _    Mailing Address  TITLE OR POSITION	by by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, Bank	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or magnetic deposition.	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  of America	STATE A	ZIP CODE A
esignated Agent: Identification of Bank, Bank	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
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Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  of America	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b> r		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected SEEC VICTORY	Organization, Affiliated Committee, Joint Fundr FUND	aising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 15320		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, etc.  Citibal	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposited afety deposit boxes or mailing and the control of Bank, Citibal	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, etc.  Citibal	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
ELECT DEMOCF	ATIC WOMEN 2022		
	COO DENINGVI VANIA AVE CE 445400		
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	1	
Full Name	CITY A	STATE A	
Full Name	CITY A	elephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	CITY   CITY   Te	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited afety deposit boxes or maintain to the control of the c	CITY   CITY   Te	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited deposit boxes or mail and the same of Bank, Amalg	CITY ▲  Te  ries: List all banks or other depositories in which aintains funds.  amated Bank	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited deposit boxes or mainly deposit boxes or mainly deposit boxes or mainly deposit boxes.	CITY   CITY   Te	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material deposit boxes or material depository, etc.	CITY ▲  Te  ries: List all banks or other depositories in which aintains funds.  amated Bank	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions are of Bank, epository, etc.	CITY ▲  Te  ries: List all banks or other depositories in which aintains funds.  amated Bank	elephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:	EEC ID accorded	C
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
DEFEND THE M	AJORITY		
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
	WASHINGTON	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		Fundraising Representa	Leadership PAC S
	y by name, address (phone number – optional)		
esignated Agent: Identi	y by name, address (phone number – optional)		
esignated Agent: Identi	y by name, address (phone number – optional)		
esignated Agent: Identi	y by name, address (phone number – optional)		
esignated Agent: Identing Full Name	CITY A	STATE A	ZIP CODE A
esignated Agent: Identi	CITY A		
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	CITY A  City A  Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	CITY A  City A  Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, Wood	CITY A  City A  Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, Wood	CITY ▲  CITY ▲  Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY ▲  CITY ▲  Telegraphics: List all banks or other depositories in which aintains funds.  Sboro Bank	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY ▲  CITY ▲  Telegraphics: List all banks or other depositories in which aintains funds.  Sboro Bank	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
PROTECT THE H	OUSE MAJORITY VICTORY FUND		
	044 DENINOVANIA AVENIJE OF		
Mailing Address	611 PENNSYLVANIA AVENUE SE		
	SUITE 143		
	WASHINGTON	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponsor
Full Name	by name, address (phone number – optional)		
Mailing Address			
	1		I I-I
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
	1	elephone Number	
	ies: List all banks or other depositories in which	the committee deposit	s funds, holds accounts, rents
safety deposit boxes or ma	ntains funds.		
Name of Bank, Depository, etc.	stOne Bank		
Mailing Address	102 South Clinton Street		
	lowa City		52240
	CITY A	STATE ▲	ZIP CODE ▲

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

g)or(h). <b>Joint Fu</b>	ndraising Participant:			
1.	<b>g</b>		FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
			FEC ID number	C
4				
Name of Any Cor	nected Organization, Affiliated Con	nmittee Joint Fundr	aising Representative	or Leadership PAC Sponsor
•	ACTION FUND FOR THE F			, с г. с срепсе.
Mailing Addr	910 17TH ST NW STE 925			
_				
	WASHINGTON		, DC	20006
Relationship:	CIT	Y <b>A</b>	STATE A	ZIP CODE A
	connected Organization Affiliated O		Fundraising Representa	
ш.	7 mmatou e		· unununung moprocomu	
Designated Agent	: Identify by name, address (phone n	umber – optional)		
Mailing Addres	s <u>                                    </u>			
TITLE OR PO	CITY	<b>A</b>	STATE ▲	ZIP CODE ▲
		Te	ephone Number	
	epositories: List all banks or other des or maintains funds.	epositories in which	he committee deposits	s funds, holds accounts, rents
	es of maintains funds.			
Name of Bank, Depository, etc.				
Mailing Add	ress			
				I , , , , I-I , , , ,
	CITY	<u> </u>	STATE ▲	ZIP CODE ▲

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraising					
1.				FEC ID number	C
2.				FEC ID number	C
3.				FEC ID number	C
4.				FEC ID number	C
		ited Committee, J	oint Fundrai	sing Representativ	ve, or Leadership PAC Spor
NADLER VICTOR	Y FUND				
Mailing Address	200 WEST 79TH S	STREET, #8N			
	NEW YORK			NY NY	10024
Relationship:		CITY A		STATE A	ZIP CODE ▲
П			III		
		Affiliated Committee		undraising Represen	tative Leadership PAC S
esignated Agent: Identify		Affiliated Committee		undraising Represen	tative Leadership PAC S
esignated Agent: Identify  Full Name		Affiliated Committee		undraising Represen	tative Leadership PAC S
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esignated Agent: Identify  Full Name	by name, address (	Affiliated Committee	optional)		tative Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (	Affiliated Committee	optional)		
esignated Agent: Identify  Full Name  Mailing Address	by name, address (	Affiliated Committee	optional)		
Full Name Mailing Address	by name, address (	Affiliated Committee  (phone number – c	optional)	STATE A	
Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor	by name, address (	Affiliated Committee  (phone number – c	optional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail	by name, address (	Affiliated Committee  (phone number – c	optional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor aftety deposit boxes or mail ame of Bank, epository, etc.	by name, address (	Affiliated Committee  (phone number – c	optional)	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

	g Participant:				
1.			F	EC ID number	C
2			F	EC ID number	С
3.			F	EC ID number	С
4.			F	EC ID number	С
			nt Fundraisir	ıg Representativ	e, or Leadership PAC Spor
SERVE AMERICA	A VICTORY FU	ND 			
			1 1 1 1		
	PO Box 2013				
Mailing Address					
	Salem			MA	01970
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
		Affiliated Committee		draising Represent	ative Leadership PAC S
esignated Agent: Identify				draising Represent	ative Leadership PAC S
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esignated Agent: Identify	by name, address (	(phone number – opt	ional)		
esignated Agent: Identify Full Name Ling Address	by name, address (	(phone number – opt	ional)		
Full Name Mailing Address  TITLE OR POSITION	v by name, address (	(phone number – opt	ional)	STATE A	
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	v by name, address (	(phone number – opt	ional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	v by name, address (	(phone number – opt	ional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito fety deposit boxes or ma	v by name, address (	(phone number – opt	ional)	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito aftety deposit boxes or material depository, etc.	v by name, address (	(phone number – opt	ional)	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito aftety deposit boxes or material depository, etc.	v by name, address (	(phone number – opt	ional)	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g) c	or (h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	FORMIDABLE FIV	VE VICTORY FUND		
	Mailing Address	611 PENNSYLVANIA AVENUE SE		
	Mailing Address	SUITE 143		
		WASHINGTON	l DC	20003
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
	Full Name			
	Full Name			
		CITY A	STATE A	ZIP CODE A
	Mailing Address	CITY A	STATE A ephone Number	
	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety deposi	CITY   Tel  ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   Tel  ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety deposi	CITY   Tel  ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   Tel  ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦
	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   Tel  ries: List all banks or other depositories in which t	ephone Number	ZIP CODE 🛦

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisir</b>	· .		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected IOWA 123 VICTO	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Mailing Address	5825 WATERBURY CIR		
	DES MOINES		50312
Relationship:	CITY A		
neialionship.	GII Y 🔺	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor afety deposit boxes or material depositions are of Bank,	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mailing ame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mailing ame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	raising Representativ	e, or Leadership PAC Spon
MAINTAINING C	UR MAJORITY VICTORY FUND		
	611 PENNSYLVANIA AVE SE		
Mailing Address			
	SUITE 143		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint of	Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mail to the content of the conte	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A